## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| CURRENT CORRESPONDE   | NCE ADDRESS (Note: Use BI                             | ock i for a           | ny change of address)                    | Not<br>Fee<br>pap<br>hay   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |  |   |   |  |  |
|---|---|-----------------------|--|--|---|--|---|---|--|--|
| 83719   | 7590 02/05  | /2010                 |  |  | Cer   | tificate d                                     | of Mailing or Transn  | nission   |  |  |
| AT & T LEGAL<br>ATTN: PATENT  | Department - FK<br>DEPARTMENT,<br>DOCKETING RO        |                       | 2A-207                                   | I he<br>Sta<br>add<br>trar   | creby certify that the tes Postal Service veressed to the Mail asmitted to the USP  | is Fec(s)<br>vith suffi<br>Stop 18<br>TO (571) | Transmittal is being cient postage for first SSUE FEE address a 273-2885, on the da | deposited with the United class mail in an envelope above, or being facsimile te indicated below. |  |  |
| BEDMINSTER,   | NJ 07921  |                       |  |  | Mi  | chael,   | J. Marcin   | (Depositor's name)  |  |  |
|   |   |                       |  |  | ///   | · /  | <u> </u>  | (Signature)   |  |  |
|   |   |                       |  |  | Fe  | bruary   | 7 <b>24</b> , 2010  | (Date)  |  |  |
| APPLICATION NO.   | FILING DATE   |                       |  | FIRST NAMED INVENTOR   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | ATTORNEY DOO                                   |   | CONFIRMATION NO.  |  |  |
| 10/628,852  | 07/28/2003  |                       |  | Kathryn M. Taylor  |   | 030130 (40147/09401)                           |   | 5818  |  |  |
| TITLE OF INVENTION<br>MANAGEMENT SYSTI  |   | AND C                 | OMPUTER-REA                              | DABLE MEDIUM FOR   | UPDATING INVE   | NTORY  | DATA IN AN INVE   | NTORY   |  |  |
| APPLN. TYPE   | SMALL ENTITY  | ISS                   | UE FEE DUÉ                               | PUBLICATION FEE DUE  | PREV. PAID ISSU   | E FEE  | TOTAL FEE(S) DUE  | DATE DUE  |  |  |
| nonprovisional  | NO  |                       | \$1510                                   | \$300  | \$0   |  | \$1810  | 05/05/2010  |  |  |
| EXAM  | EXAMINER  |                       | ART UNIT                                 | CLASS-SUBCLASS   |   |  |   |   |  |  |
| FRENEL,   | FRENEL, VANEL   |                       | 3687 705-028000                          |  |   |  |   |   |  |  |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |                       |  | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no namic is listed, no name will be printed. |   |  |   |   |  |  |
| 3. ASSIGNEE NAME A  | ND RESIDENCE DATA                                     | A TO BI               | E PRINTED ON                             | THE PATENT (print or ty  | pe)   |  |   |   |  |  |
| recordation as set forth  | in 37 CFR 3.11. Com                                   | ified be<br>pletion o | low, no assignee<br>of this form is NO   | T a substitute for filing an   | assignment.   |  |   | cument has been filed for   |  |  |
| (A) NAME OF ASSIC   | inee  |                       |  | (B) RESIDENCE; (CIT  |   |  | •   |   |  |  |
| AT&T INTELL   | ECTUAL PRO  | PERT                  | Y I, L.P.                                |  | REI   | NO, N  | EVADA   |   |  |  |
| Please check the appropri   | ate assignee category or                              | catego                | ries (will not be p                      | rinted on the patent):   | Individual XC   | orporatio                                      | n or other private grou   | up entity Government  |  |  |
| 4a. The following fee(s) a  Issue Fee  Publication Fee (N   | re submitted:<br>o small entity discount p            | permitte              |  | b. Payment of Fee(s): (Ple A check is enclosed. Payment by credit ca   |   |  |   | hown above)   |  |  |
| Advance Order - #   | of Copies   |                       | <del></del>                              | The Director is hereb<br>overpayment, to Depo  | y authorized to char<br>osit Account Numb   | rge the re<br>er5(                             | equired fee(s), any def<br>0-1492 (enclose an                                       | iciency, or credit any extra copy of this form).  |  |  |
| 5. Change in Entity Stat  | us (from status indicate                              | d above               | )  |  |   |  |   |   |  |  |
| **  | SMALL ENTITY state                                    |                       |  | b. Applicant is no lor   | -   |  |   |   |  |  |
| NOTE: The Issue Fee and interest as shown by the i  | l Publication Fee (if req<br>ecords of the United Sta | uired) w<br>nes Pate  | rill not be accepte<br>int and Trademark | d from anyone other than<br>Office.  | the applicant; a regi   | istered at                                     | torney or agent; or the   | e assignee or other party in  |  |  |
|   |   |                       |  |  | - <sup>-</sup>  | 10   | , 2010  |   |  |  |
| Authorized Signature  | -///((_)  | / _                   | Marcin                                   |  | Date  | 1-   | 48,19   |   |  |  |

bis form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

| INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifical   | ed below or directed oth  | or transmitting the ISS of the Patent, advance terwise in Block 1, by | (a) specifying a new co   | rresp                            | ondence address; and/or   | (b) indicating a sepa            | could be completed where<br>correspondence address as<br>rate "FEE ADDRESS" for                      |  |
|--|---|---|---|----------------------------------|---|----------------------------------|--|--|
| CURRENT CORRESPOND   | DENCE ADDRESS (Note: Use Blo  | ock 1 for any change of address                                       | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. |                                  |   |                                  |  |  |
| 83719  | 7590 02/05.   | /2010   |   |                                  |   | of Mailing or Transc             | nicelon  |  |
| AT & T LEGAI<br>ATTN: PATEN  | Department - FK<br>DEPARTMENT,<br>T DOCKETING RO  |   | ]<br>S<br>a<br>t  | here<br>States<br>addre<br>ransn | hy certify that this Fee(s  | Transmittal is being             | deposited with the United t class mail in an envelope above, or being facsimile are indicated below. |  |
| BEDMINSTER   | , NJ 07921  |   |   |                                  | Michael   | J. Marcin                        | (Depositor's name)   |  |
|  | ī   | ~   |   |                                  | 11/10/  | 7                                | (Signature)  |  |
|  |   |   | į   |                                  | Februar   | y <b>24</b> ,2010                | (Date)   |  |
| APPLICATION NO.  | FILING DATE   | .   | FIRST NAMED INVENT  | OR                               | ATTORNEY DOCKET   |                                  | CONFIRMATION NO.   |  |
| 10/628,852   | 10/628.852 07/28/2003   |   |   |                                  | 0301  | 30 (40147/09401)                 | 5818   |  |
| TITLE OF INVENTION<br>MANAGEMENT SYST  | I: METHOD, SYSTEM,<br>EM  |   |   |                                  |   |                                  |  |  |
| APPLN, TYPE  | SMALL ENTITY  | ISSUE PEE DUE   | PUBLICATION FEE DU  | JE I                             | PREV. PAID ISSUE FEE  | TOTAL FEE(S) DUE                 | DATE DUE   |  |
| nonprovisional   | NO  | \$1510  | \$300   | _                                | \$0   | \$1810                           | 05/05/2010   |  |
| EXAMINER   |   | ART UNIT  | CLASS-SUBCLASS  | ╝                                | •   |                                  |  |  |
| FRENEL   | , VANEL   | 3687  | 705-028000  |                                  | ·   |                                  |  |  |
| 1. Change of correspond<br>CFR 1.363).  Change of corresp<br>Address form PTO/SI  "Fcc Address" ind<br>PTO/SB/47; Rev 0.3-6<br>Number is required. | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |   |   |                                  |   |                                  |  |  |
| PLEASE NOTE: Uni<br>recordation as set fort<br>(A) NAME OF ASSI  | h in 37 CFR 3.11. Comp  | ified below, no assigned oletion of this form is NO                   | e data will appear on th<br>OT a substitute for filing  | e pate<br>an as                  | ent. If an assignee is id<br>signment.<br>and STATE OR COUNT                |                                  | cument has been filed for  |  |
|  | iate assignee category or   |   | orinted on the patent):   | ΠI                               | ndividual Corporati   | on or other private gro          | up entity Government   |  |
| 4a. The following fee(s)  Issue Fee  Publication Fee (N  Advance Order   | No small entity discount p  |   | ☐ A check is enclose☐ Payment by credit   | d.<br>card.<br>eby a             | Form PTO-2038 is attauthorized to charge the reaction of the Account Number | ched.<br>equired fee(s), any def |  |  |
|  | s SMALL ENTITY statu  | is. See 37 CFR 1.27.  |   |                                  | r claiming SMALL ENT  |                                  |  |  |
| NOTE: The Issue Fee an interest as shown by the  | d Publication Fee (if requ<br>records of the United Sta   | uired) will not be accept<br>tes Patent and Trademan                  | ed from anyone other the<br>k Office.   | an the                           | applicant; a registered a   | tttorney or agent; or the        | e assignee or other party in   |  |
| Authorized Signature   | -///(L  |   | <u> </u>  |                                  | Date 2/2  | y , 2010                         |  |  |
| Typed or printed name  | E   | ael J. Marcin   |   |                                  | Registration No.  | 48,19                            |  |  |
| This collection of inform  | ation is required by 37 C   | FR 1.311. The informat  | ion is required to obtain   | or ret                           | ain a benefit by the publicated to take 12 minutes                          | ic which is to file (and         | by the USPTO to process)   |  |

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.